3/28/2019 Division of Corporations

H19000104355

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H19000104355 3)))

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

2019 MAR 29 AM 9:56
FLORIDA DEPARTMENT OF STATE
APPROVED AND FILED

2019 MAR 29 AM 9:12

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CONIFEX CROSS CITY LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	$55.00

Electronic Filing Menu Corporate Filing Menu Help

T.C. 3/28/19

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Conifex Cross City LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 6/28/2013 and assigned Florida document number M13000004114.

This amendment is submitted to amend the following:

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2019 MAR 29 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:
Enter Florida street address

City, Florida *Zip Code*

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	BW SLC Holdings LLC	40 S.W. 10th Street Cross City, FL 32628	☐ Add
			☒ Remove
			☐ Change
MGR	Conifex Holdco LLC	40 S.W. 10th Street Cross City, FL 32628	☒ Add
			☐ Remove
			☐ Change
MGR	Ken Shields President	40 S.W. 10th Street Cross City, FL 32628	☒ Add
			☐ Remove
			☐ Change
MGR	Yuri Lewis CFO, Secretary	40 S.W. 10th Street Cross City, FL 32628	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

2019 MAR 29 A 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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AND
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E. Effective date, if other than the date of filing: _____ **(optional)**
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b).
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated March 27, 2019.

Signature of a member or authorized representative of a member

Yuri Lewis
Typed or printed name of signee

Filing Fee: $25.00